

EXHIBIT A

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Addressee's Name
Representative Jim Jordan
2056 Rayburn House Office
Building
Washington, DC 20515

2. Addressee's ZIP+4®
9590 9402 7848 2234 4528 38

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

4. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

5. Insured Mail Restricted Delivery (over \$500) ☐

PS Form 3811, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

B. Received by (Printed Name)
 C. Date of Delivery

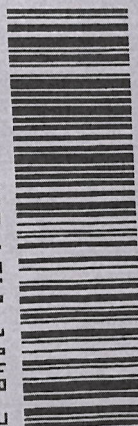
D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

Domestic Return Receipt

GIBSON DUNN
Representative Jim Jordan
2056 Rayburn House Office
Building
Washington, DC 20515

Gibson, Dunn & Crutcher LLP
 333 South Grand Avenue
 Los Angeles, CA 90071-3197

9489 0090 0027 6361 1849 35



Label 890-PB, Oct. 2015
 Pitney Bowes

